FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB NUMBER: 3235-0076 EXPIRES: APRIL 30, 2008 ESTIMATED AVERAGE BURDEN HOURS PER RESPONSE.....16

1394072

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

| | SEC USE ONLY |
|---|-------------------|
| 1 | PrefixSerial ! |
| | DATE RECEIVED |
| 1 | 1 |

| Name of Offering (check if this is an a | amendment and name has changed, and indicate change.) | SEC Mall Processing |
|---|--|---|
| An offering of limited partn | ership interests | SEC Mall Processor Section 4(6) ULOE |
| Filing Under (Check box(es) that apply): | ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 | Section 4(6) ULOE |
| Type of Filing: New Filing | | 0.0008 |
| | A. BASIC IDENTIFICATION DATA | FFR S 0 5000 |
| 1. Enter the information requested abou | t the issuer | |
| Name of Issuer (check if this is a | an amendment and name has changed, and indicate change.) | Washington, DC |
| QED Capital L.P. | | 112 |
| Address of Executive Offices | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 201 Great Road, Suite 101, A | Acton, MA 01720 | (978) 929-0800 |
| Address of Principal Business Operations | (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| (if different from Executive Offices) | | |
| Brief Description of Business: | | |
| Private Investment Compan | ıy | |
| Type of Business Organization | * | |
| corporation | ☐ limited partnership, already formed | |
| | | other (please specify): limited liability company |
| business trust | ☐ limited partnership, to be formed | PROCESSES |
| - | Month Year | |
| Actual or Estimated Date of Incorporation | or Organization: $0 \mid 1$ $0 \mid 7$ | ☑ Actual ☐ Estimated ☐ ☐ |
| Jurisdiction of Incorporation or Organization | on: (Enter two-letter U.S. Postal Service abbreviati | / = - V / IUM |
| | CN for Canada; FN for other foreign jurisdiction | on) DIE |
| GENERAL INSTRUCTIONS | | THOMSON |
| | | FINANCIAL |
| | | |

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



| | | A. BASIC IDENTIF | ICATION DATA | | |
|--|---------------------|------------------------------|----------------------------|-----------------|--|
| 2. Enter the information re- | quested for the fo | ollowing: | _ | | |
| • Each promoter of th | e issuer, if the is | suer has been organized v | within the past five years | ; | |
| securities of the issu | ier; | | | | or more of a class of equity |
| Each executive office and | cer and director (| of corporate issuers and o | f corporate general and r | nanaging partno | ers of partnership issuers; |
| Each general and m | anaging partner | of partnership issuers. | | | |
| Check Box(es) that Apply: | □ Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | □ General and/or ■ Managing Partner |
| Full Name (Last name first, | | | | | |
| QED Investment Mans Business or Residence Addre | agement LLC | 1 Street City State 7 in (| Code) | | |
| 201 Great Road, Suite | 101. Acton. MA | 1 30 cet, City, State, Zip (| | | |
| Check Box(es) that Apply: | ⊠ Promoter | ☐ Beneficial Owner | ☑ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, Azizoglu, Murat | | | | | |
| Business or Residence Addr | | | Code) | | |
| 201 Great Road, Suite Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number and | d Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | Promoter | ☐ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Addr | ess (Number an | d Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | ☐ Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Add | ress (Number an | d Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | ☐ Promoter | ⊠ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, | if individual) | | | | |
| Business or Residence Add | ress (Number an | d Street, City, State, Zip | Code) | | |
| Check Box(es) that Apply: | ☐ Promoter | □ Beneficial Owner | ☐ Executive Officer | ☐ Director | ☐ General and/or Managing Partner |
| Full Name (Last name first, | | | | | |
| Business or Residence Add | ress (Number an | d Street, City, State, Zip | Code) | | |

| | | | | | B. II | NFORMA | TION AB | OUT OFF | ERING | | | | |
|------|-------------------|--------------------------------------|---|---|---|---|--|--|--|---|--|--------------|---------------|
| 1. | Has th | e iccliet co | old or doe | s the issue | er intend to | sell, to no | m-accredit | ed investor | s in this of | fering? | | Yes □ | No ⊠ |
| 1, | | | | | | | | | | J | | | |
| 2. | Answe What i | er also in A | Appendix, imum inve | Stment the | t, it filling that will be a | under ULC accepted fr | om any ind | lividual? | | | | <u>\$100</u> | <u>*0000,</u> |
| | | | | | | | | | | | | * may b | e waived. |
| | | | | | | | | | | | | Yes | No |
| 3. | Does t | he offerin | ıg permit j | oint owner | rship of a | single unit | ? | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | 🛛 | |
| 4. | any co | mmissior fering. If nd/or with | n or simila a person t h a state or | r remuner o be listed r states, lis | ation for s d is an ass st the name | solicitation sociated pe e of the bro | of purchar rson or ago oker or dea | sers in con ent of a br iler. If mor | inection wi oker or de e than five | th sales of aler registo (5) person | or indirectly, securities in ered with the is to be listed ker or dealer | | |
| Ful | | (Last nan | ne first, if | individual |) | | | | | | | | |
| Nar | ne of A | ssociated | Broker or | Dealer | - | et, City, Sta | | | | | | | |
| Stat | (Chec | k "All Sta | ites" or chi | eck individ | dual States | s) | | | *************************************** | | *************************************** | 🗆 All S | States |
| ſ | ALI | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| • | [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| | MT] | [NE] | [NV] | [NH] | [NJ] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| _ | [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |
| | | • | ne first, if | | | | | , | | | | | |
| Bus | siness o | r Residen | ce Addres | s (Number | r and Stree | et, City, Sta | ate, Zip Co | de) | | | | | |
| Nai | me of A | ssociated | Broker or | Dealer | | | | • | | | | -,'' | |
| Sta | tes in V (Chec | Vhich Per k "All Sta | son Listed ites" or ch | Has Solic eck individ | ited or Int | ends to Sol | licit Purcha | asers | | | | 🗖 All S | States |
| | [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] |
| | [IL] | [IN] | [IA] | [KS] | [KY] | [LA] | [ME] | [MD] | [MA] | [MI] | [MN] | [MS] | [MO] |
| [| MT] | [NE] | [NV] | [NH] | [1/1] | [NM] | [NY] | [NC] | [ND] | [OH] | [OK] | [OR] | [PA] |
| | [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSE | S AND U | SE OF PROCE | EDS |) :C |
|---|---------------------------|--|-------------------------|-----------------------------|
| 1 Enter the aggregate offering price of securities included in this offering and the to | itai amour | it aiready soid. E | inter v | ir answer is he amounts |
| "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) at of the securities offered for exchange and already exchanged. | ia maican | | DOIOW II | |
| Type of Security | | Aggregate | Amo | unt Already |
| • | | fering Price | • | Sold |
| Debt | \$_ | 0 | \$ | |
| Equity | | _ | _ | • |
| ☐ Common ☐ Preferred | \$ _ | 0 | \$ <u> </u> | 0 |
| Convertible Securities (including warrants) | \$ | 0 | \$ | 0 |
| Partnership Interests | \$ | 0 | \$ | 0 |
| Other (Specify <u>LP interests</u>) | \$ - | Unlimited | \$ | |
| Total | \$ | Unlimited | \$ | |
| Answer also in Appendix, Column 3, if filing under ULOE. | _ | | | |
| 2. Enter the number of accredited and non-accredited investors who have aggregate dollar amounts of their purchases. For offerings under Rule 504, indica securities and the aggregate dollar amount of their purchases on the total lines. Enter | te the nun "0" if ans | iber of persons wer is "none" or | who ha "zero." De | ve purcnased |
| | Nı | imber Investors 0 | \$ | T I UI CII UI CII |
| Accredited Investors | | | | |
| Non-accredited Investors | | 0 | \$ | |
| Total (for filings under Rule 504 only) | | N/A | . \$ | N/A |
| Answer also in Appendix, Column 4, if filing under ULOE. | | | | |
| 3. If this filing is for an offering under Rule 504 or 505, enter the information requate, in offerings of the types indicated, in the twelve (12) months prior to the file. | uested for rst sale of | all securities sol securities in this | ld by the offerin | e issuer, to g. Classify |
| securities by type listed in Part C – Question 1. Type of Offering | | Type of | D | ollar Amount |
| Type of Offering | | Security | | Sold |
| Rule 505 | | N/A | _ \$ | N/A |
| Regulation A | | N/A | _ \$ | N/A |
| Rule 504 | | N/A | _ \$ | N/A |
| Total | | N/A | _ \$ | N/A |
| 4. a. Furnish a statement of all expenses in connection with the issuance and Exclude amounts relating solely to organization expenses of the issuer. The is contingencies. If the amount of an expenditure is not known, furnish an estimate | ntormatio | n may be given | as subje | ect to future |
| Transfer Agent's Fees | • | | 3 \$ | 0 |
| Printing and Engraving Costs | | | □ \$ | |
| Legal Fees | | ۵ | ☑ \$ | 20,000 |
| Accounting Fees | | ٥ | ⊠ \$ | 10,000 |
| Engineering Fees | | C | 3 \$ | |
| Sales Commissions (specify finders' fees separately) | | | □ \$ | |
| Other Expenses (identify) Blue Sky filing fees | | 5 | ⊠ \$ | 1,200 |
| Total | | | ⊠ \$ | \$31,200 |

| | C. OFFERING PRICE, N | IUMBER OF INVESTORS, EXPENSES | AND I | USE | OF PROCE | EDS | | |
|---|--|---|---------------|------------|---------------|--------------|-------------|-------------|
| | b. Enter the difference between the aggree Question 1 and total expenses furnished in rethe "adjusted gross proceeds to the issuer." | egate offering price given in response to Part C esponse to Part C - Question 4.a. This difference i | - S | | | • | | 22.052.000 |
| | expenses estimated on \$100,000,000 offering a | | \$ | | 99,968,800 | | | |
| 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, | | | | | | | | |
| | | | | | ctors & | | - | nents To |
| | 0.1.1.1.0 | | | | filiates 0 | | | thers 0 |
| | | | | _ | | | _ | |
| | | Making of machiners and aguinment | | _ | | | | |
| | | allation of machinery and equipment | | _ | 0 | | _ | - 0 |
| | | ldings and facilities | Ч | J - | | | * – | |
| | this offering that may be used in | cluding the value of securities involved in exchange for the assets or securities of | | \$ | 0 | | \$ | 0 |
| | | | | \$ | 0 | | \$ - | 0 |
| | * * | | | s - | 0 | | s - | 0 |
| | Other (specify): Investment in Por | | | \$ - | 0 | \boxtimes | \$ _ | 99,968,800 |
| | | | | \$ | 0 | | \$ | 99,968,800 |
| | | ıls added) | \boxtimes | \$ - | 9 | 9,96 | 8,800 |) |
| | 204123,11010 | D. FEDERAL SIGNATURE | | | | | | |
| th w | e following signature constitutes an unde | signed by the undersigned duly authorized ertaking by the issuer to furnish to the U.S. Furnished by the issuer to any non-accredited | Secu | rities | and Exchang | e Co | mmı | ssion, upon |
| Is | suer (Print or Type) | Signature Manager | | | Date | ~ . / | 1 | |
| Q | ED Capital L.P. | 116.54 | | | 21 | K/ | 0 | 5 |
| Na | me of Signer (Print or Type) | Title of Signer (Print or Type) | | | | | | |
| M | lurat Azizoglu | Managing Member of QED Investment M Capital L.P. | anage | ment | LLC, the Ge | nera | Part | ner of QED |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | | |
|----|--|-----|---------|
| 1. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No ⊠ |

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

| Issuer (Print or Type) | Signature - | Date | | | | |
|------------------------|---|---|--|--|--|--|
| QED Capital L.P. | Viory | 2/8/08 | | | | |
| Name (Print or Type) | Title (Print or Type) | | | | | |
| Murat Azizoglu | Managing Member of QED Investment Partner of QED Capital L.P. | mber of QED Investment Management LLC, the General D Capital L.P. | | | | |

APPENDIX

| 1 | 2 | | 3 | | 4 | , | | 5 | |
|-------|--|--|--|--------------------------------------|--|---|--------------|--|--|
| | non-ac | to sell to credited s in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | |
| State | Yes | No | <u> </u> | Number of Accredited Investors | Amount | Number of Non-Accredi ted Investors | Amount | Yes_ | No |
| AL | | | | _ | | | | <u> </u> | |
| AK | 1 | | | | | | | <u> </u> | |
| AZ | | 1 | | | | | | <u> </u> | |
| AR | | | | | | | <u> </u> | <u> </u> | |
| CA | | X | LP interests | | | 0 | 0 | <u> </u> | X |
| CO | | | | | | | | <u> </u> | <u> </u> |
| CT | 1 | X | LP interests | | | 0 | 0 | <u> </u> | X |
| DE | | <u> </u> | | | | | <u> </u> | | |
| DC | 1 | | | | | | | | |
| FL | | | | | | | | | |
| GA | | | | | | | ! . <u>_</u> | | |
| HI | | | | _ | | | <u></u> | | |
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| KS | | <u> </u> | | | | | | <u> </u> | |
| KY | | | | | | | | <u> </u> | |
| LA | | | | | | | | | |
| ME | | | <u> </u> | | | | <u> </u> | <u> </u> | |
| MD | | 1 | | | | | | <u> </u> | |
| MA | | X | LP Interests | | | 0 | 0 | <u> </u> | X |
| MI | | 1 | | | | | | | |
| MN | | | | | | | | <u> </u> | |
| MS | | | | | | | | | |
| МО | | | | | | | <u> </u> | <u> </u> | - |
| MT | | | | | | | | | |
| NE | 1 | | | | | | | | |
| NV | 1 | | | | _ | | | <u> </u> | |
| NH | <u> </u> | T | | | | | | <u> </u> | |
| NJ | | | | | | | <u> </u> | <u> </u> | |
| NM | | | | | | | | <u> </u> | |
| NY | | | | | | | <u> </u> | | |
| NC | | | | | | | <u> </u> | | |

APPENDIX

| | | | 3 | | 4 | | | 5 | |
|-------|-----------|--|--|--|----------|---|---|--|--------------|
| 1 | Intend to | to sell to credited s in State -Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | ecurity egate price Type of investor and amount purchased in State | | | Disqualification under State ULOB (if yes, attach explanation of waiver granted) (Part E-Item 1) | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredi ted Investors | Amount | Yes | No |
| ND | | | | | | | | | |
| ОН | | | | | | | | <u> </u> | - |
| OK | | | | - | | | | <u> </u> | ļ |
| OR | | | | | | | | | |
| PA | | | | | | | | | <u> </u> |
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| PR | | | | <u> </u> | | | <u> </u> | <u></u> | ┚ |

Note:

